IN THE SUPREME COURT OF MISSOURI

Application for Certificate to Practice Temporarily for Lawyers Applying for Admission to The Missouri Bar

I, declare under penalty of perjury:

- (1) that I have applied for admission to practice law in Missouri under Rule 8.07, Rule 8.10 or Rule 8.105;
- (2) that I have not previously failed the Missouri bar examination;
- (3) that I am an active member in good standing of the highest court of a state or territory of the United States;
- (4) that I am not under suspension or disbarment by any court of record or the subject of any pending disciplinary complaints;
- (5) that I am not ineligible for admission under Rule 8.04;
- (6) that I will be supervised as provided in Rule 4-5.1 by the active Missouri licensed attorney whose name and bar enrollment number are shown below:

Supervising Attorney's Name

MO Bar #

- (7) that attached to this application is a statement from the supervising lawyer agreeing to the specified supervision;
- (8) that I understand this application for a certificate to practice law in this state temporarily must be approved by the Court;
- (9) that if I am issued a certificate to practice law in this state temporarily, it will be valid for 12 months from the date it is issued, unless revoked before the expiration of 12 months;
- (10) that the certificate shall be revoked immediately without further action by the Court if I
 - (1) Fail the bar examination,
 - (2) Fail to take the bar examination when eligible to do so,
 - (3) Am denied permission to take the bar examination or denied approval on character and fitness grounds
 - (4) Am denied admission without examination or limited admission as in-house counsel and am not permitted to take the bar examination in lieu thereof;
 - (5) No long meet the qualifications prescribed in Rule 8.06(a);
- (11) that I have thoroughly familiarized myself with and will abide by Supreme Court Rule 4, Rules of Professional Conduct;

-	e the jurisdiction of the Su professional conduct.	preme Court of Miss	souri and Chief Dis	sciplinary	
I hereby swear (or affirm) under penalty of perjury, that all statements herein were made by me and are true and complete.					
Dated this	_day of		_ 20		
		Signature of Appl	licant		
Subscribed and sworn t	o before me this	day of		20	
		Notary Public			
[Seal or stamp must be aff	ixed]				

(Applicant's Name and Social Security Number)				
STATEMENT OF SUPERVISING ATTORNEY				
(Supervising Attorney's Full Name)	Missouri Bar Number)			
I state that I am an active member in good standing of the Missouri Bar.				
If the above-named applicant is granted a certificate to practice law in Missouri temporarily pursuant to Rule 8.06, I agree to exercise supervisory responsibility for the applicant as provided in Rule 4-5.1 during the period that the certificate is valid.				
	Signature of Supervising Attorney			
Street Address				
City, State, Zip				
Douting Talanhana				
Daytime Telephone				
(List Above Supervising Attorney's	Business Address and Daytime Telephone Number)			

In the Application of: